PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

| Application or Docket Number |
|------------------------------|
| 09/844833 |
| 01/844833 |

| CLAIMS AS FILED - PART I | | | | | | | | SMALL EN | ITITY | OR | OTHER | |
|--|--|---|-----------------------|-------------------------------|-----------------------------|------------------|-----|---------------------|------------------------|----------|---------------------|---------------------|
| r | | | (Column 1) (Column 2) | | | | 1 | TYPE | | | SMALL | ENTITY |
| TOTAL CLAIMS | | | | | | | | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 375.00 | OR | BASIC FEE | 750.0 |
| TOTAL CHARGEABLE CLAIMS | | | min | us 20= | * | | | X\$ 9= | · | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | minus 3 = | | | | | X42= | | OR | X84= | |
| MU | LTIPLE DEPEN | DENT CLAIM PE | RESENT | | | | | +140= | Tipera Tip | ≓∟ OR | +280= | |
| * If the difference in column 1 is less than zero, enter "0" in column | | | | | | olumn 2 | ; | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II | | | | | | | | : | | • | OTHER | THAN |
| 1 | 20.05 (Column 1) (Column 2) (Column 3 | | | | | | | SMALL ENTITY | | | SMALL | <u> TITNE</u> |
| AMENDMENTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADD TION/ FEE |
| | Total | * 2, | Minus | ** 2 | 0 | = | | X\$ 9= | ::: } : . | OR | X\$18= | |
| | Independent | * 2 | Minus | *** | 5 01 4114 | = | | X42= | | OR | X84= | |
| | FIRST PRESE | NTATION OF MU | JUIPLE DEF | ENDEN | CLAIM | |] | +140= | | OR | +280= | |
| | | | | | | | | TOTAL | | OR | TOTAL | |
| | | (Column 1) | ADDIT. FEE | <u> </u> | 1 | ADDIT. FEE | . , | | | | | |
| _ | | ו ד | | ADDI | 1 | | 400 | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADD TION, FEE |
| | Total | * | Minus | ## | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | : | | 1 | | |
| | | | ۵. | | | • | | +140= | | OR | +280= | |
| | | | · | | | | | TOTAL ADDIT: FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | (Colu | mn 2) | (Column 3) |)_ | : | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | PREVI | IEST BER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADD TION FEE |
| | Total | * | Minus | ** | | <u></u> | | X\$ 9=- | | OR | X\$18= | |
| | Independent | * | Minus | ### | | = | | X42= | | | X84= | |
| | FIRST PRESE | NTATION OF M | ULTIPLE DE | PENDEN | T CLAIM | 115 14 - 1 | 1: | | | OR | | |
| | | | * | . : : | | | | +140= | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1: | | | | | | | | | | | | |
| | THE THRUESTIMENT | ibol Fleviously Pa | השוריטו (ויטומוט | " wurcheig | iony is an | , induce inditio | | a.o ap | h. abi wie od | | | |